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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

**Application or Docket Number** 

10024294

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                  |              |                                 |                  |        | SMALL ENTITY TYPE   |                        |         | OTHER THAN<br>OR SMALL ENTITY |                        |
|--|--|---|------------------|--------------|---------------------------------|------------------|--------|---------------------|------------------------|---------|-------------------------------|------------------------|
| TOTAL CLAIMS   |  |   | 7                |              |                                 |                  | 1      | RATE                | FEE                    |         | RATE                          | FEE                    |
| FOR  |  |   | NUMBER FILED     |              | NUMBER EXTRA                    |                  |        | BASIC FEE           | 370.00                 | OR      | BASIC FEE                     | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 7 minus 20=      |              | £                               |                  |        | X\$ 9=              |                        | OR      | X\$18=                        |                        |
| INDEPENDENT CLAIMS   |  |   | / minus 3 =      |              |                                 |                  |        | X42=                |                        | OR      | X84=                          | _                      |
| MULTIPLE DEPENDENT CLAIM P   |  |   | RESENT           |              |                                 |                  |        | +140=               |                        | OR      | +280=                         | , , , ,                |
| * If the difference in column 1 is less than zero, er  |  |   |                  |              | r "O" in c                      | olumn 2          |        | TOTAL               |                        | OR      | TOTAL                         | 740                    |
| TFW And t  CLAIMS AS AMENDED - PART II  5-23-05 (Column 1) (Column 2) (Column 3)   |  |   |                  |              |                                 |                  | L      | SMALL E             | NTITY                  | OR      | OTHER<br>SMALL                |                        |
| AMENDMENTA   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUM<br>PREVI | HEST<br>IBER<br>OUSLY<br>FOR    | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | · 7                                       | Minus            | ** (         | 20                              | <b>-</b> →       |        | X\$ <sup>-</sup> 9= |                        | OR      | X\$18=                        | V                      |
|  | Independent                                    | TATION OF M                               | Minus            | ENDEN        | 3<br>TCI AIM                    | <u>-0</u>        | -      | X42=                |                        | OR      | X84=                          | ·                      |
| Ш  | FIRST PRESE                                    | NIATION OF M                              | JETH-LE DEF      | CHOLIN       | COSIN                           |                  | J      | +140=               |                        | OR      | +280≒                         | \                      |
|  |  |   |                  |              |                                 |                  |        | TOTAL<br>ADDIT, FEE |                        | OR      | TOTAL<br>ADDIT, FEE           |                        |
| •  |  | (Column:1)                                |                  | (Cólu        | mn 2)                           | (Column 3        | )      |                     |                        |         |                               |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUA<br>PREV  | HEST<br>MBER<br>NOUSLY<br>OFOR  | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus            | ##           |                                 | =                |        | X\$ 9=              |                        | OR      | X\$18=                        | -                      |
|  | Independent                                    | *   | Minus            | ***          |                                 | =                |        | X42=                |                        | OR      | X84=                          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                  | ل      | +140=               |                        | OR      | +280=                         |                        |
|  |  |   |                  |              |                                 |                  |        | TOTAL               |                        | OR      | TOTAL                         |                        |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE   |  |   |                  |              |                                 |                  |        |                     |                        |         |                               |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                  | NUI<br>PREV  | HEST<br>MBER<br>IOUSLY<br>D FOR | PRESENT<br>EXTRA |        | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | •   | Minus            | 40           |                                 | <b>a</b>         |        | √\$ 9=              |                        | OR      | X\$18=                        |                        |
|  | Independent                                    | •   | Minus            | ***          |                                 | -                | 4      | X42=                |                        | OR      | X84=                          |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                  |              |                                 |                  |        | +140=               |                        | OR      | +280=                         |                        |
| * If the intry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                  |              |                                 |                  |        |                     |                        | ΛP      | TOTAL                         |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                  |              |                                 |                  |        |                     |                        |         |                               | <b></b>                |
|  | The 'Highest Nur                               | nber Previously Pa                        | aid For (Total o | r Indepen    | ident) is th                    | e highest numi   | per to | nua su rue abl      | propriate bo           | x un co | Numn 1,                       |                        |